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Bib Data Sheet

CONFIRMATION NO. 2002

SERIAL NUMBER 09/924,957	FILING DATE 08/07/2001 RULE	CLASS 372	GROUP ART UNIT 2828	ATTORNEY DOCKET NO. HRL035
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APPLICANTS

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** CONTINUING DATA *AL none* *****

** FOREIGN APPLICATIONS *AL none* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 10/03/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Examiner's Signature <i>AL</i> Initials <i>AL</i>	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
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ADDRESS
 28848
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TITLE
 Single polarization fiber laser

FILING FEE RECEIVED 952	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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